

# **TOWN OF DAVIE**

## **TOWN COUNCIL AGENDA REPORT**

**TO:** Mayor and Councilmembers

**FROM/PHONE:** Chief John George, (954) 693-8350

**PREPARED BY:** Nina B. Valdez

**SUBJECT:** Resolution

**AFFECTED DISTRICT:** District 3

**TITLE OF AGENDA ITEM:** A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, AUTHORIZING THE MAYOR TO ENTER INTO AN AGREEMENT BETWEEN MYSTIQUE ESTATES HOA AND THE TOWN OF DAVIE POLICE DEPARTMENT FOR TRAFFIC CONTROL AND AUTHORITY TO ENTER PREMISES.

**REPORT IN BRIEF:** Mystique Estates HOA would like to enter into an agreement with the Town of Davie Police Department, wherein the owner/association specifically grants the Town power and authority to enforce traffic control on the property of the owner/association, which is required by law to enable enforcement of traffic laws on private roadways and streets within this community.

**PREVIOUS ACTIONS:** N/A

**CONCURRENCES:** N/A

**FISCAL IMPACT:** not applicable

Has request been budgeted? n/a

If yes, expected cost: \$

Account Name:

If no, amount needed: \$

What account will funds be appropriated from:

Additional Comments:

**RECOMMENDATION(S):** Motion to approve Resolution

**Attachment(s):** Resolution Agreement for Traffic Control and Authority to Enter Premises Agreement, and 2006 Corporation Documents (signed by Mystique Estates HOA)

**RESOLUTION \_\_\_\_\_**

**A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, AUTHORIZING THE MAYOR TO ENTER INTO AN AGREEMENT BETWEEN MYSTIQUE ESTATES HOA AND THE TOWN OF DAVIE POLICE DEPARTMENT FOR TRAFFIC CONTROL AND AUTHORITY TO ENTER PREMISES.**

**WHEREAS,** Mystique Estates HOA and the Davie Police Department would like to enter into an "Agreement for Traffic Control" and "Authority to Enter Premises Agreement"; and

**WHEREAS,** Mystique Estates HOA has the authority to sign said agreements, and have done so; and

**WHEREAS,** the Davie Police Department requests the Mayor add his signature to said Agreement;

**NOW THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWN OF DAVIE, FLORIDA**

**SECTION 1.** The Town Council of the Town of Davie hereby authorizes the Mayor to execute the "Agreements for Traffic Control" and "Authority to Enter Premises Agreement" attached hereto as Exhibit A.

**SECTION 1.** This resolution shall take effect immediately upon its passage and adoption.

PASSED AND ADOPTED THIS \_\_\_\_\_ day of \_\_\_\_\_, 2007

\_\_\_\_\_  
MAYOR/COUNCIL MEMBER

ATTEST:

\_\_\_\_\_  
TOWN CLERK

APPROVED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 2007



**DAVIE POLICE DEPARTMENT**  
1230 South Nob Hill Road  
Davie, FL 33324  
(954) 693-8200  
FAX: (954) 693-8399 (Road Patrol)



### **AGREEMENT FOR TRAFFIC CONTROL**

The Town of Davie, Florida, a municipal corporation of the State of Florida, (hereinafter referred to as the "Town"), and MYSTIQUE ESTATES HOA (hereinafter referred to as the "Owner"), agree on this 20 day of December, 2006 to enter into the following Traffic Jurisdiction Agreement.

**WHEREAS**, the Owner currently holds legal title to that parcel of real property which is the subject of this Agreement, as more particularly described on Exhibit "A" attached hereto (the "Property" or "Common Areas"); and

**WHEREAS**, the Town, its duly appointed officers, employees and agents, recognizes that it has full power and jurisdiction to enforce all laws of the nation, state, county and city, duly enacted, excluding those traffic control and enforcement of same on the private property of Owner; and

**WHEREAS**, the Owner wishes to specifically grant the Town the power and authority to enforce traffic control on the Property and to grant an easement for ingress and egress for said purpose; and

**WHEREAS**, pursuant to Florida Statutes §316.006(2)(b), Owner wishes to have the Town exercise jurisdiction for traffic regulation over a private or limited access road or roads (the "Roads"), owned or maintained by Owner upon the property.

### **WITNESSETH**

**NOW, THEREFORE**, for and in consideration of the mutual covenants and undertakings of the parties hereto, and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties hereto covenant and agree as follows:

1. The foregoing recitals are true and correct and are incorporated herein by reference.
2. The Owner agrees that the Town shall have jurisdiction to enforce state, county and city traffic regulations over any Roads within the private property.
3. The Town hereby agrees to exercise jurisdiction for traffic control purposes over any Roads within the private property.
4. Either party may terminate this Agreement upon sixty (60) days written notice to the other party.
5. The Owner, in further consideration for the above stated commitments of the Town, does hereby declare, establish, provide, give and grant to the Town, its successors, administrators and assigns, a non-exclusive easement for ingress and egress over the private property for the purpose of providing traffic control.

6. The Owner agrees to indemnify and hold the Town of Davie, its officers and elected officials, its employees, assigns and agents, the Town of Davie Police Department, its employees, agents and assigns, and the Police Chief, his heirs and assigns, harmless from and against any and all claims or causes of action resulting from personal injury or damage to property caused by or arising from any lawful action(s) effectuated by members of the Town of Davie authorized by this Agreement. Nothing in this Agreement shall be construed to effect in any way the Town's rights, privileges and immunities as set forth in Florida Statute §768.28.
7. The Owner agrees to reimburse the Town of Davie for any actual costs of traffic control and enforcement necessitated by this Agreement over and above the normal costs of traffic control and enforcement typically incurred by the Town of Davie in exercising such control over all streets and highways located within its boundaries, such as additional costs related to signage conforming with state law.
8. Any notices required under this Agreement shall be deemed to have been duly given on the date said notice was mailed by United States Certified Mail, Return Receipt Requested, postage prepaid, and addressed to the Town or the Owner, as the case may be, at the address set below for each such party, or to such other address as any party may, from time to time, specify by written notice to all other parties.
9. No change or modification of this Agreement shall be valid unless in writing and signed by all parties hereto.
10. The Owner expressly understands and agrees that nothing contained herein is intended or should be construed as creating or establishing a duty or obligation of the Town to provide traffic jurisdiction to the private property. The Town's presence on, or use of the premises, does not in any way create or establish in favor of Owner a level of prevention or the enforcement of traffic laws greater than the Town owes to the general public.

IN WITNESS WHEREOF, the parties hereto have set their hands and seals for the purposes herein expressed on the day and year first above written.

WITNESSES:

THE TOWN OF DAVIE, FLORIDA

\_\_\_\_\_  
Signature BY: \_\_\_\_\_ Signature

TITLE:

\_\_\_\_\_  
Print Name

ADDRESS: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

ATTESTED BY

\_\_\_\_\_  
TOWN ATTORNEY

Approved as to form and legality for the use and reliance of the Town of Davie, Florida, only.

STATE OF FLORIDA  
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 200\_\_, by \_\_\_\_\_, of the Town of Davie, Florida, a municipal corporation of the State of Florida, who is \_\_\_\_\_ personally known to me, or who has produced \_\_\_\_\_ as identification, and who did/did not take an oath.

\_\_\_\_\_  
NOTARY PUBLIC, State of Florida

\_\_\_\_\_  
Type, Stamp, Print Name

MY COMMISSION EXPIRES:

WITNESSES:

BBB #699  
Signature

DET. CRAIG ALBERTINI  
Print

Nina B. Valdez  
Signature

Nina B. Valdez  
Print

OWNER:

BY: Clark Alvarado Boff  
Signature

Clark Alvarado, Board of Directors  
Print

ADDRESS: 11011 Sheridan St

Pembroke Pines, FL 33026

954 450 9400  
Phone Number

THE FOREGOING INSTRUMENT MUST BE NOTARIZED OR ATTESTED TO BY A  
CERTIFIED POLICE OFFICER (F.S. 117.10)

The foregoing instrument was sworn and  
Subscribed before me:

STATE OF FLORIDA  
COUNTY OF BROWARD  
(AFFIX SEAL)

Tiffany Roads #551  
Signature of Attesting Officer, I.D. #

Tiffany Roads  
Print Name

Date: 12-20-06

The foregoing instrument was acknowledged  
before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,  
by \_\_\_\_\_, who  
is \_\_\_\_\_ personally known to me, or \_\_\_\_\_ who has  
produced \_\_\_\_\_ as  
identification.

Notary Public: \_\_\_\_\_



DAVIE POLICE DEPARTMENT  
1230 South Nob Hill Road  
Davie, FL 33324  
(954) 693-8200  
FAX: (954) 693-8399 (Road Patrol)



**AUTHORITY TO ENTER PREMISES AGREEMENT**

Mystique Estates HOA, a Corporation/ Owner,  
(Name of Corporation/Name of Owner)

located at 11011 Sheridan St, Pembroke Pines FL hereby  
(Corporate/Owner Mailing Address & Phone Number)

authorizes the Town of Davie Police to enter the below described property, located in the Town of Davie, Broward County, Florida, without limitations or restrictions and at their discretion to enforce municipal traffic laws, criminal state statutes and municipal ordinances and perform any and all police-related activity.

**Please Give Physical Address Below and**

**Attach a copy of the Legal Description of the Property (See example of Legal Description – "Exhibit A" attached)**

DBA: Mystique Estates  
106 Terr & Orange Dr to, Davie, FL  
(Address of Property) Hiatus & 38th

Mystique Estates HOA expressly understands and agrees that  
(Name of Corporation/Owner)

since the above-described property is privately owned, the Town of Davie Police Department may choose not to conduct routine patrol upon said property nor accepts the obligation to conduct routine police-related activities on said property.

The Town of Davie Police may arrest, at its discretion, those person(s) believed to be trespassing or committing other criminal violations on said property.

Upon an arrest for a criminal violation, Mystique Estates HOA agrees to  
(Name of Corporation/Owner)

assist in the criminal prosecution of said offender.

Mystique Estates HOA hereby agrees to communicate the terms  
(Name of Corporation/Owner)

and conditions of this agreement to any and all parties present on the above described property by reason of lease, rental, assignment, contract, invitation, employments, etc.

Mystique Estates HOA further agrees to notify the Town of Davie  
(Name of Corporation/Owner)

through the Chief of Police for the Town of Davie Police Department ninety (90) days prior to the sale, transfer or assignment of the property or any portion thereof. This notification must be accomplished through the United States Mail, certified, return receipt requested.

Mystique Estates HOA agrees to indemnify and hold the Town of  
(Name of Corporation/Owner)

Davie, its employees, assigns and agents, the Town of Davie Police Department, its officers, employees, agents and assigns, and Police Chief John A. George, his heirs and assigns, harmless from and against any and all claims or causes of action resulting from personal injury or loss to property caused by or arising from an arrest(s) or other lawful action(s) effectuated by members of the Town of Davie Police Department.

Nothing in this agreement shall be construed to effect in any way the Town's rights, privileges and immunities as set forth in Florida Statutes 768.28.

Mystique Estates HOA expressly understands and agrees that  
(Name of Corporation/Owner)

nothing contained herein is intended or should be construed in any way as creating or establishing the duty or obligation of the Town of Davie to provide security or protection to the above-described property. Mystique Estates HOA

(Name of Corporation/Owner)

further understands and agrees that nothing contained herein is intended or should be



construed in any way to obligate the Town of Davie Police Department to perform routine patrol or other police-related functions on or about the above-described property.

The Town of Davie's presence on, or use of the premises, does not in any way create or establish in favor of Mystique Estates HOA a level of  
(Name of Corporation/Owner)

prevention and detection of crime or the enforcement of the penal, criminal, traffic, or highway laws of the State greater than the Town of Davie owes to the general public.

Either party to this agreement may terminate this agreement at will providing that sixty (60) days written notice establishing such intent is served upon the other party by certified mail, return receipt requested.

WITNESSES:

CBT #699  
Signature

DET. CRAIG ALBERTINI  
Print

Nina B. Valdez  
Signature

Nina B. Valdez  
Print

OWNER:

BY:

Clark Alvarado  
Signature

Clark Alvarado, Board of Directors  
Print

ADDRESS: 11011 Sheridan St

Pembroke Pines, FL

954 450 9400

Phone Number

THE FOREGOING INSTRUMENT MUST BE NOTARIZED OR ATTESTED TO BY A  
CERTIFIED POLICE OFFICER (F.S. 117.10)

The foregoing instrument was sworn and  
Subscribed before me:

STATE OF FLORIDA  
COUNTY OF BROWARD  
(AFFIX SEAL)

Tiffany Richards  
Signature of Attesting Officer, I.D. #

Tiffany Richards  
Print Name

Date: 12-20-06

The foregoing instrument was acknowledged  
before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,  
by \_\_\_\_\_, who  
is \_\_\_\_\_ personally known to me, or \_\_\_\_\_ who has  
produced \_\_\_\_\_ as  
identification.

Notary Public: \_\_\_\_\_

Does this property conduct business  
under any other names? If yes,  
please list below the DBAs:

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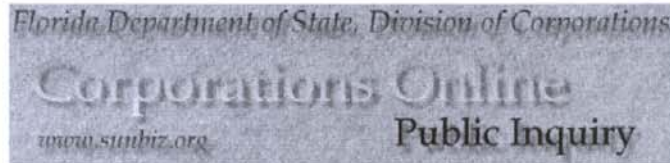
Print Names and List Phone Numbers of  
EMERGENCY CONTACTS:

Robin Cohen 954 444 3922

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**Florida Non Profit****MYSTIQUE HOME OWNERS ASSOCIATION, INC.**

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**PRINCIPAL ADDRESS**  
11011 SHERIDAN STREET  
208  
COOPER CITY FL 33026  
Changed 04/21/2006

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**MAILING ADDRESS**  
11011 SHERIDAN STREET  
208  
COOPER CITY FL 33026  
Changed 04/21/2006

**Document Number**  
N95000001303

**FEI Number**  
650581068

**Date Filed**  
03/17/1995

**State**  
FL

**Status**  
ACTIVE

**Effective Date**  
NONE

**Last Event**  
REINSTATEMENT

**Event Date Filed**  
01/14/2005

**Event Effective Date**  
NONE

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**Registered Agent**

Name & Address
ATLANTIS MANAGEMENT SERVICES, LC 11011 SHERIDAN STREET 208 COOPER CITY FL 33026
Name Changed: 04/21/2006
Address Changed: 04/21/2006

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**Officer/Director Detail**

Name & Address	Title
REID, JOE 10651 SW 40 MANOR	D

FORT LAUDERDALE FL 33328	
ARNESON, GREG 4241 SW 106 TERRACE DAVIE FL 33328	VPD
HETTLAGE, JUDY 4000 SW 106 TERR. DAVIE FL 33328	S
STREIMER, JAY 4400 SW 107 WAY DAVIE FL 33328	D
DUCASSE, KATHY 10681 SW 40 MANOR DAVIE FL 33328	P/D
BARBERIO, BRUCE 4090 SW 106 TERR. DAVIE FL 33328	D

### Annual Reports

Report Year	Filed Date
2005	08/08/2005
2006	01/12/2006
2006	04/21/2006

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### Document Images

Listed below are the images available for this filing.

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[01/12/2006 -- ANN REP/UNIFORM BUS REP](#)  
[08/08/2005 -- REINSTATEMENT](#)  
[02/10/2005 -- ANN REP/UNIFORM BUS REP](#)  
[01/14/2005 -- REINSTATEMENT](#)  
[01/23/2002 -- ANN REP/UNIFORM BUS REP](#)  
[03/14/2001 -- ANN REP/UNIFORM BUS REP](#)  
[06/08/2000 -- ANN REP/UNIFORM BUS REP](#)  
[04/30/1999 -- ANNUAL REPORT](#)  
[06/01/1998 -- ANNUAL REPORT](#)  
[12/26/1997 -- Reg. Agent Change](#)  
[03/21/1997 -- ANNUAL REPORT](#)  
[08/23/1996 -- 1996 ANNUAL REPORT](#)

**THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT**

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**Corporations Inquiry**

**Corporations Help**

**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 12, 2006 8:00 am**  
**Secretary of State**

01-12-2006 90170 040 \*\*\*\*61.25

<b>DOCUMENT # N95000001303</b> 1. Entity Name <b>MYSTIQUE HOME OWNERS ASSOCIATION, INC.</b>																																																																																																																																																					
Principal Place of Business 4780 N. STATE ROAD #E250 LAUDERDALE LAKES, FL 33319			Mailing Address 4780 N. STATE ROAD #E250 LAUDERDALE LAKES, FL 33319																																																																																																																																																		
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6. Name and Address of Current Registered Agent  <b>PHOENIX MANAGEMENT SERVICES</b> <b>4780 N. STATE ROAD 7</b> <b>LAUDERDALE LAKES, FL 33319</b>				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code																																																																																																																																																	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.																																																																																																																																																					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																																																																																																																																																					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>																																																																																																																																																	
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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</th> </tr> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%; text-align: center;"><input type="checkbox"/> Delete</td> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%; text-align: center;"><input type="checkbox"/> Change    <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>REID, JOE</td> <td></td> <td>STREET ADDRESS</td> <td><b>ALVARADO, CLARE</b></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>10651 SW 40 MANOR FORT LAUDERDALE, FL 33328</td> <td></td> <td>CITY - ST - ZIP</td> <td><b>3850 SW 106 TERR DAVIE, FL 33328</b></td> <td></td> </tr> <tr> <td>TITLE</td> <td>VPD</td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change    <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>ARNESON, GREG</td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4241 SW 106 TERRACE</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>DAVIE, FL 33328</td> <td></td> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>S</td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change    <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>HETLAGE, JUDY</td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4000 SW 106 TERR.</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>DAVIE, FL 33328</td> <td></td> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change    <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>STREIMER, JAY</td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4400 SW 107 WAY</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>DAVIE, FL 33328</td> <td></td> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>P/D</td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change    <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>DUCASSE, KATHY</td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>10681 SW 40 MANOR</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>DAVIE, FL 33328</td> <td></td> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td style="text-align: center;"><input type="checkbox"/> Delete</td> <td>TITLE</td> <td></td> <td style="text-align: center;"><input type="checkbox"/> Change    <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>BARBERIO, BRUCE</td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4090 SW 106 TERR.</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>DAVIE, FL 33328</td> <td></td> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>						10. 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NAME	STREIMER, JAY		NAME																																																																																																																																																		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																																																																																					
SIGNATURE: _____ <b>GREG ARNESON</b> <b>4/14/06</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #</small>																																																																																																																																																					